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ANNUAL AUDITED HERORT **FORM X-17A-5 PART III**

OMB APPROVAL

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Information Required of Brokers and Dealers Pursuant to Section 17 of the Securities Exchange Act of 1934 and Rule 17a-5 Thereunder

REPORT FOR THE PERIOD BEGINNING 0	2/01/05 AND	ENDING <u>01</u>	/31/06	
	MM/DD/YY		MM/DD/YY	
A. REGIS	STRANT IDENTIFICATION	ĭ		
NAME OF BROKER-DEALER: LIBERTY ASSOCIATES, INC.			OFFICIAL USE ONLY	
ADDRESS OF PRINCIPAL PLACE OF BUSIN	ESS: (Do not use P.O. Box No.)		FIRM I.D. NO.	
36 West 44th Street	, Suite 1100			
	(No. and Street)			
New York	New York	10	036-8142	
(City)	(State)	(Zip	(Zip Code)	
NAME AND TELEPHONE NUMBER OF PER SIDNEY W. AZRILIANT	· ·		RT 212) 869-8220	
		(A	rea Code – Telephone Numbe	
B. ACCO	UNTANT IDENTIFICATIO	N		
	CPA lame - if individual, state last, first, middle	name)		
	BROOKLYN, NEW YORK 1122		(G: O 1)	
(Address)	(City)	(State)	(Zip Code)	
CHECK ONE:			OCESSED	
Certified Public Accountant	'	<u> </u>	LG 3 1 2008 E	
☐ Public Accountant				
☐ Accountant not resident in United	1 States or any of its possessions.	J.	HONSON INAVSIAL	
F	OR OFFICIAL USE ONLY			

*Claims for exemption from the requirement that the annual report be covered by the opinion of an independent public accountant must be supported by a statement of facts and circumstances relied on as the basis for the exemption. See Section 240.17a-5(e)(2)

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1410 (06-02)

OATH OR AFFIRMATION

I, SIDNEY W. AZRILIANT_	, swear (or affirm) that, to the best of		
	statement and supporting schedules pertaining to the firm of		
LIBERTY ASSOCIATES, IN			
of JANUARY 31	, 20 06 , are true and correct. I further swear (or affirm) that		
neither the company nor any partner, proprietor, prin	cipal officer or director has any proprietary interest in any account		
classified solely as that of a customer, except as follo	ws:		
NO EXCEPTIONS			
	Signature		
ANDREW NOTARY PUBLIC. Sta No. 02K15 Qualified in New Commission Expires	ate of New York 11tte 009982		
This report ** contains (check all applicable boxes): (a) Facing Page. (b) Statement of Financial Condition. (c) Statement of Income (Loss). (d) Statement of Changes in Financial Condition (e) Statement of Changes in Stockholders' Equi	n. ty or Partners' or Sole Proprietors' Capital.		
Computation for Determination of the Reser			
☒ (1) An Oath or Affirmation.☐ (m) A copy of the SIPC Supplemental Report.	s found to exist or found to have existed since the date of the previous audit.		
**For conditions of confidential treatment of certain	portions of this filing, see section 240.17a-5(e)(3).		